

**CALIFORNIA ARTS COUNCIL
LOCAL ARTS EDUCATION PROGRAM
INVOICE
FOR FINAL PAYMENT**

PART A - CONTRACT INFORMATION

CONTRACT NUMBER: _____

DATE: _____

CONTRACTOR: NAME/ADDRESS

INVOICE NUMBER: _____

CONTRACT PERIOD: _____

☐ check if this is a change of address

PART B -EXPENDITURES

LINE ITEMS

1. Artistic - Salaries
2. Administrative - Salaries
3. Educational – Salaries
4. **SUBTOTAL (1+2+3)**
5. Operating/Production Expenses
EXPENDITURES (4 + 5)

COLUMN I ACTUAL EXPENDITURES THIS CONTRACT			COLUMN II APPROVED CONTRACT BUDGET		
CAC	MATCH		CAC	MATCH	
	LAA	LEA		LAA	LEA
\$	\$	\$	\$	\$	\$

PART C – GRANT PAYMENT SUMMARY

A. Expenditures (enter **CAC** total from Column I above) \$ _____

B. Payments received FOR THIS CONTRACT ONLY (enter total of checks received from CAC) \$ _____

C. Invoice submitted to CAC but payment not yet received (DO NOT enter the amount of this invoice) \$ _____

D. Payment request for this invoice (A - B - C = D)* \$ _____

***ATTACH SELF EVALUATION AND NEA SURVEY FORMS**

CERTIFICATION

"I hereby certify under penalty of perjury that this final report is in accordance with the contract approved by and the standards of the California Arts Council, that payment has not been previously received for the amount claimed herein and no further expenditures will be charged to this contract."

AUTHORIZED OFFICER (PRINT)

PREPARER'S PRINTED NAME

AUTHORIZED OFFICER (SIGNATURE)

PHONE NUMBER

FOR CAC ACCOUNTING USE ONLY

FY _____ FUND _____ CODING _____ SCHEDULE _____

SIGNATURE

DATE

